

Prepared by M. Gordon
Date 7-10-05

~~YES~~ NO Primary Examiner box complete.
~~YES~~ NO Issuing Classification complete.

YES/NO Examiner's initials or cross-through lines supplied for each item cited by applicant.
YES NO Date(s) supplied/complete on all PTO-1449/892 sheets. (Month and year required.)

YES	NO	Brief Description of Drawings includes description of each figure in drawings.
YES	NO	Continuing data is mentioned in 1 st paragraph. (Can be an insert.)

YES/ NO Claims listed on Notice of Allowability match allowed claims and/or index of claims.
YES/ NO Claims correctly numbered in index.
 (No duplicate or missing claim numbers.)
 (No incorrect dependencies.)

YES ~~**NO**~~ If necessary (biological sequence listing).

YES **NO** Either Box No. 3 (drawings accepted) or Box No. 8 (corrected drawing request) has been checked.